In re	Gary	Beto	and	Beverly	Beto	_/ Debtor	Case No	
								(if known)

AMENDED SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital	DEPENDENTS OF C	DEBTOR AN	D SPOUSE				
Status:		AGE					
Married	Son		18				
	Son		16				
	Son		14				
EMPLOYMENT:	DEBTOR		SPO	USE			
Occupation	Customer Service	Fal	brication				
Name of Employer	Newman	Cre	estliner				
How Long Employed	9 years	2 3	years				
Address of Employer	So Hwy 10	60	9 13th Ave NE				
	Royalton MN 56373	Li	ttle Falls MN 56	345			
Income: (Estimate of avera	ge monthly income)		DEBTOR		SPOUSE		
Current Monthly gross was	les, salary, and commissions (pro rate if not paid monthly)	\$	3,243.93		2,314.00		
Estimated Monthly Overtin	ne	\$ \$	0.00 3,243.93		0.00 2,314.00		
SUBTOTAL		٦	3,243.93	١٣			
LESS PAYROLL DED			475.89	 	558.5		
a. Payroll Taxes and b. Insurance	Social Security	\$	162.50	\$	0.00		
c. Union Dues		\$	0.00	\$	0.00		
d. Other (Specify):	Disability	\$	143.50	\$	0.0		
	Retirement	\$	<u>0.0</u> 0	\$	0.0		
	Emp Loans	\$\$\$\$\$	0.00 781.88	§	0.0 558.5		
SUBTOTAL OF PAYROLL	DEDUCTIONS			`			
TOTAL NET MONTHLY T	AKE HOME PAY	\$	2,462.05	\$	1,755.4.		
Regular income from oper	ation of business or profession or farm (attach detailed statement)	\$	0.00	1 7	0.0		
Income from Real Property		\$	0.00	1 *	0.0		
Interest and dividends		\$	0.00 0.00	1 7	0.0 0.0		
	upport payments payable to the debtor for the debtor's use or that	\$	0.00	\$	0.0		
of dependents listed above				1			
Social Security or other go Specify:	verninent assistance	\$	0.00	\$	0.0		
Pension or retirement inco	me	\$	0.00	\$	0.0		
Other monthly income							
Specify:		\$	0.00	I	0.0		
TOTAL MONTHLY II	NCOME	\$	2,462.05	\$	1,755.4		
	OTAL COMBINED MONTHLY INCOME \$ 4,23 (eport also on Summary of Schedules)	17.50					

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

n	re	Garv	Beto	and	Beverly	Beto
	10	Gary		and	Deverry	me

	_				
/	I)	e	h	tη	r

Case	No.	 		

(if known)

AMENDED SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

	T.	
Rent or home mortgage payment (include lot rented for mobile home)	\$	960.00
Are real estate taxes included? Yes No 🛛		
Is property insurance included? Yes No 🛛		100 0
Utilities: Electricity and heating fuel	\$	180.00
Water and sewer	\$	0.00 34 .00
Telephone Other Cell Phone	\$	60.00
Other Cell Phone Other Cable	\$	26.00
Other	\$ \$	0.00
	'	
Home maintenance (Repairs and upkeep)	\$	50.00
Food	\$	<u>558.00</u>
Clothing	\$	75.00
Laundry and dry cleaning	\$	50.00
Medical and dental expenses	\$	150.00
Transportation (not including car payments)	\$	190.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	 \$	100.00
Charitable contributions ' · ·	\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	[\$	58.75
Life	\$	0.00
Health	\$	0.00
Auto	\$	365.00
Other	\$	0.00
Other	(\$	0.00
Other	\$	0.00
Taxes (not deducted from wages or included in home mortgage)		
Specify: Property Taxes	\$	85.00
Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan)	J	
Auto	 \$	0.00
Other: <u>Second</u> <u>Mortgage</u>	\$	342.00
Other:	\$	0.00
Other:	 \$	0.00
Alimony, maintenance, and support paid to others	\$	0.00
Payments for support of additional dependents not living at your home	(\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
Other: Cleaning Supplies	\$	40.00
Other: Smokes	\$	150.00
Other: School Lunches	\$	80.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedu		3,553.81

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly Income	\$ 4,217.50
B. Total projected monthly expenses	\$ <u>3,553.81</u>
C. Excess Income (A minus B)	\$ <u>663.69</u>
D. Total amount to be paid into plan each: Monthly	\$ 663.69

SIGNATURE DECLARATION

UNITED STATES BANKRUPTCY COURT DISTRICT OF MINNESOTA

In re: Gary & Beverly Beto

Debtor(s).	Case No. <u>04-34127</u>
PETITION, SCHEDULES & STATEMENTS CHAPTER 13 PLAN SCHEDULES AND STATEMENTS ACCOM AMENDMENT TO PETITION, SCHEDULE MODIFIED CHAPTER 13 PLAN OTHER (Please describe: NOTICE OF HILL I [We], the undersigned debtor(s) or authori following declarations under penalty of perjury:	IPANYING VERIFIED CONVERSION S & STATEMENTS ring on Pre-Confirmation Midified America Schalule I, America
petition, statements, schedules, amer above, is true and correct; The information provided in the "De the electronic commencement of the [individual debtors only] If no Soc Information Pages" submitted as a p above-referenced case, it is because I consent to my attorney electronical Court my petition, statements and so as indicated above, together with a s and the completed "Debtor Informat	orney and provided in the electronically filed adments, and/or chapter 13 plan, as indicated above-referenced case is true and correct; ial Security Number is included in the "Debtor art of the electronic commencement of the I do not have a Social Security Number; lly filing with the United States Bankruptcy chedules, amendments, and/or chapter 13 plan, ecanned image of this Signature Declaration ion Pages," if applicable; and rs only] I have been authorized to file this
Date: 9-9-04 X Signature of Debtor or Authorized Representative Printed Name of Debtor or Authorized Representative	Signature of Joint Debtor Beverly 5. Beto Printed Name of Joint Debtor

Form ERS 1 (Rev. 10/03)

AFFIDAVIT OF SERVICE BY MAIL

STATE OF MINNESOTA)	
)	SS
COUNTY OF STEARNS)	

Lisa Jacoby, first duly sworn, states that on the 9th day of September, 2004, she served the annexed a Notice of Hearing on Pre-Confirmation Modified Plan, Modified Chapter 13 Plan, Amended Schedule I, and Amended Schedule J, by mailing to said creditors and trustees a true and correct copy thereof, enclosed in an envelope, postage prepaid, and depositing same in a U.S. receptacle at St. Cloud, Minnesota, addressed to said entities as follows:

Michael Farrell Bankruptcy Trustee P.O. Box 519 Barnesville, MN 56514

Arrow Financial Services 885 S Janeville Street White Water, WA 53190

Calvary PO Box 1030 Hawthorne, NY 10532

Citi Financial Services Inc 40 33rd Avenue South St Cloud, MN 56301

Collection Bureau of Little Falls 120 21st Street SE, Ste 2 Little Falls, MN 56345

Consulting Radiologists Ltd 1221 Nicollet Mall, Ste 600 Minneapolis, MN 55403

Family Medical Center 811 SE 2nd Street, Ste A Little Falls, MN 56345

Kenny Rehab Associates

Litton Loan Service 4828 Loop Central Drive Houston, TX 77081-2226

Monogram Ban of Georgia PO Box 103036 Rosewell, GA 30076 US Trustee 1015 US Courthouse 300 South 4th Street Minneapolis, MN 55415

Asset Acceptance Corp PO Box 2036 Warner, MI 48090-2036

Certified Recovery Systems PO Box 815 Eau Claire, WI 54702

Citi Financial Services Inc PO Box 7490 40 33rd Avenue South St Cloud, MN 56302

Community First National Bank 65 East Broadway Little Falls, MN 56345

Credit Management Services PO Box 130784 Roseville, MN 55113

Financial Recovery Services PO Box 385908 Minneapolis, MN 55438-5908

Lakes Gas Co No 43 PO Box 253 Royalton, MN 56373

Menards PO Box 6150 Rapids City, SD 57709-6150

NCO Financial Systems PO Box 41417 Philadelphia, PA 19101 Northway Oil PO Box 127 Little Falls, MN 56345

Payments Plus 3419 3rd Street North St Cloud, MN 56301

Reliance Recoveries 6160 Summit Drive, Ste 420 Minneapolis, MN 55430

Sams PO Box 3724 Knoxville, TX 37927

Sheldon Law PO Box 7215 St Cloud, MN 56301

St Gabriel's Hospital 815 SE 2nd Street Little Falls, MN 56345

Wilford & Geske Attorneys at Law 7650 Currell Blvd, Ste 300 Woodbury, MN 55125 Otremba Disposal PO Box 168 Royalton, MN 56373

Phoenix Management Systems PO Box 3972 Minneapolis, MN 55403-3972

Robert M Lindstrom PA 3904 Sheridan Ave South Minneapolis, MN 55410

Sears PO Box 182149 Columbus, OH 43218

Shopko Optical #4061 501 Hwy 10 SE St Cloud, MN 56304

Transworld Systems 5880 Commerce Blvd Rohnert Park, CA 94928

Wolpofff & Abramson 702 King Fram Blvd Rockville, MD 20850-5775

the last known address of said creditors and trustees,

Lisa Jacoby

Subscribed and sworn to before me this 9th day of September, 2004.

Notary Public

JULIE V. HENNEN

N OTARY PUBLIC - MINNESOTA

My Commission Expires Jan. 1, 20.3